

CERTIFIED MAIL - RETURN RECEIPT REQUESTED NO.

P410484222

STATE OF CONNECTICUT
DEPARTMENT OF HEALTH SERVICES
BUREAU OF HEALTH SYSTEM REGULATION
DIVISION OF MEDICAL QUALITY ASSURANCE

In re:

Linda Turkington, L.P.N.

Petition No. 870608-11-008

CONSENT ORDER

WHEREAS, Linda Turkington of Manchester, Connecticut has been issued license number 020747 to practice as a licensed practical nurse by the Department of Health Services pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and

WHEREAS, Linda Turkington hereby admits and acknowledges that:

1. During 1985 she was addicted to cocaine.
2. During 1985 while she was employed as a nurse at Riverside Health Care, she diverted the controlled substance Tylenol with Codeine.
3. During 1985, she abused or utilized to excess said Tylenol with Codeine.
4. She has a long-standing history of drug and alcohol abuse.
5. She is licensed as a nurse only in Connecticut and does not have licensure pending in any other state.
6. The conduct described in 1., 2., 3. and 4. above fails to conform to the accepted standards of the nursing profession in violation of Section 20-99(b) of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to Section 19a-17 and Section 20-99(a) of the General Statutes of Connecticut, Linda Turkington hereby stipulates and agrees to the following:

1. That she waives the right to a hearing on the merits of this matter.
2. That her license number 020747 to practice as a licensed practical nurse in the State of Connecticut is on probation until January 1, 1993.
3. That her probation is subject to the following conditions:
 - A. (1) She shall provide a copy of this Consent Order to her therapist.
 - (2) She shall engage in counseling with a licensed or certified therapist at her own expense.
 - (3) She shall not obtain or use any drugs or alcohol that have not been prescribed for her for a legitimate purpose by a licensed health practitioner.
 - (4) She shall be responsible for monthly reports from her therapist for the first two years of probation; said reports are due on the first business day after every month.
 - (5) She shall be responsible for bi-monthly reports from her therapist for the remainder of probation; said reports are due on the first business day after every second month.
 - (6) She shall be responsible for providing random urine or blood screens for drugs and alcohol at the discretion of her therapist. There must be at least one such drug and alcohol screen monthly for the first two years of probation. Said reports shall be negative for drugs and alcohol.

- (7) Said reports cited in 3.A.4., 3.A.5. and 3.A.6. above shall include documentation of dates of treatment, an evaluation of her progress and drug and alcohol free status, and copies of all laboratory reports.
- B.
- (1) She shall provide a copy of this Consent Order to her employer.
 - (2) She shall notify the Connecticut Board of Examiners for Nursing prior to any change in nursing employment. She will also provide documentation to the Board from the new employer of their willingness to monitor her pursuant to this Consent Order prior to starting work.
 - (3) She shall not accept employment as a pool nurse for the period of her probation.
 - (4) She shall be responsible for monthly reports from her nursing supervisor (i.e. Director of Nursing) due on the first business day after every month for the first two years of her nursing employment during the period of her probation.
 - (5) She shall be responsible for bi-monthly reports from her nursing supervisor due on the first business day after every second month, for the remainder of her employment during the period of her probation.
 - (6) Said reports shall include documentation of her ability to safely and competently practice nursing.

4. The Connecticut Board of Examiners for Nursing must be informed prior to any change of employment.
5. That the Connecticut Board of Examiners for Nursing must be informed prior to any change of address.
6. That all correspondence and reports are to be addressed to:

Office of the Board of Examiners for Nursing
Department of Health Services
150 Washington Street
Hartford, CT 06106

7. That any deviation from the term(s) of probation shall constitute a violation of probation. A violation of any term(s) of probation specified in paragraphs 3., 4., or 5. above shall result in the right of the Connecticut Board of Examiners for Nursing to immediately revoke her registered nurse license. Any extension of time or grace period for reporting granted by the Connecticut Board of Examiners for Nursing shall not be a waiver or preclude the Board's right to revoke at a later time. The Connecticut Board of Examiners for Nursing shall not be required to grant future extensions of time or grace periods. Notice of revocation shall be sent to her address of record (most current address reported to the Licensure and Renewal Section of the Division of Medical Quality Assurance of the Department of Health Services or the Connecticut Board of Examiners for Nursing).
8. That this Consent Order is effective the first day of the month immediately following the date said Consent Order is ordered and accepted by the Connecticut Board of Examiners for Nursing.
9. That she understands that notice of this Consent Order is a matter of public record.

10. That she understands that this Consent Order may be considered as evidence of the above admitted violations in any proceeding before the Connecticut Board of Examiners for Nursing (1) in which her compliance with this same order is at issue, or (2) in which her compliance with Section 20-99(b) of the General Statutes of Connecticut, as amended, is at issue.
11. That this Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, that said order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive her of any rights that she may have under the laws of the State of Connecticut or of the United States.
12. That she permits the Public Health Hearing Office of the Division of Medical Quality Assurance, Department of Health Services or a representative thereof to present this Consent Order and the basis for said Consent Order to the Connecticut Board of Examiners for Nursing. She understands that the Connecticut Board of Examiners for Nursing has complete and final discretion as to whether an executed Consent Order is approved or granted.
13. That she understands that she has the right to consult with an attorney prior to signing this document.
14. That the Consent Order of Linda Turkington, L.P.N., Petition No. 860109-11-004 dated June 24, 1986 shall become void when this Consent Order becomes effective.

I, Linda Turkington, have read the above Consent Order, and I agree and admit to the terms and allegations set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Linda Turkington
Linda Turkington

Subscribed and sworn to before me this 9th day of March 1988.

Debbie K. Ferguson
Notary Public or person authorized
by law to administer an oath or
affirmation

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Health Services on the 14th day of March 1988, it is hereby accepted.

Stanley K. Peck
Stanley K. Peck, Director
Division of Medical Quality Assurance

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners for Nursing on the 16th day of March 1988, it is hereby ordered and accepted.

BY: Bette Jane M. Murphy, R.N.
Bette Jane M. Murphy, R.N., Chairperson
Connecticut Board of Examiners for Nursing